

Number of each in

birth stated.

and as a bl.

more

**ARIZONA STATE BOARD OF HEALTH**  
BUREAU OF VITAL STATISTICS  
STANDARD CERTIFICATE OF BIRTH

State File No.

Registered No.

210

138

1. PLACE OF BIRTH

Cnty.

Gila

State

Arizona

District or Township

or Village

City

Miami

No. 87 Red Spring Canyon

St.

Ward

(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child

Maria Perez

(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child

To be answered ONLY  
in event of plural  
births.

4. Twin, triplet or other

6. Legitimate?

7. Date  
of birthMarch 29 1929  
Month Day Year

8.

FATHER

Full name

Arnulfo Perez

14.

MOTHER

Full maiden name

Delfina Soto

9. Residence

(Usual place of abode)

Miami, Ariz.

If non-resident, give place and state.

15. Residence

(Usual place of abode)

Miami, Ariz.

If non-resident, give place and state.

10. Color or race

Mexican

11. Age at last birthday 25 (Years)

16. Color or race

Mexican

17. Age at last birthday 27 (Years)

12. Birthplace (city or place)

(State or country)

Mexico

18. Birthplace (city or place)

(State or country)

Rodeo  
New Mexico

13. Occupation

Nature of industry

Miner

Copper

19. Occupation

Nature of industry

Housewife

20. Number of children of this mother

(Taken as of time of birth of child herein  
certified and including this child.)

(a) Born alive and now living

(b) Born alive but now dead

(c) Stillborn

21. Were precautions taken against eph-  
thalmia neonatorum.

**CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE \***

I hereby certify that I attended the birth of this child, who was

alive

(Born alive or stillborn)

at 8:50 A.M.

on the date above stated.

\* When there was no attending physician  
or midwife, then the father, householder,  
etc. should make this return. A stillborn  
child is one that neither breathes nor  
shows other evidence of life after birth.

Signature

J. J. Arnold  
M.D.

(Physician or midwife)

Given name added from  
a supplemental report

Month, day, year

Address

Miami, Arizona

Filed

Apr 5 1929

19

C. E. D. King

Registrar.

Registrar.

479-329-426